

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	70591	8/20
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>[Signature]</i>	8-30-99
FORMALITY REVIEW	<i>[Signature]</i>	<i>[Signature]</i>	9/2

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	5/5/01
2	10/12/01
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here